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	States Bankr rn District of Po						Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle):  Stouffer, Chad R.				of Joint De	ebtor (Spouse shley M.	) (Last, First	, Middle):
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):	3 years				used by the J maiden, and		in the last 8 years ):
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-8475	yer I.D. (ITIN)/Comp	lete EIN	(if more	our digits o than one, state	all)	Individual-	Γaxpayer I.D. (ITIN) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 530 Imel Road Normalville, PA		ZIP Code	530	Address of Imel Romalville,	ad	(No. and Str	zip Code
County of Residence or of the Principal Place of Fayette		5469		y of Reside	ence or of the	Principal Pla	15469 ace of Business:
Mailing Address of Debtor (if different from stre	eet address):	ZIP Code	Mailin	g Address	of Joint Debt	or (if differe	nt from street address):  ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):			1				
Type of Debtor  (Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  Corporation (includes LLC and LLP)  Partnership  Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Filing Fee (Check one box  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to attach signed application for the court's consideratidebtor is unable to pay fee except in installments. I Form 3A.  Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerating the sig	individuals only). Must on certifying that the Rule 1006(b). See Officia 7 individuals only). Must	on ss ). e box: otor is a so otor is not otor's aggi less than s applicable lan is bein eeptances eccordance	defined "incurr a person as mall business a small business as with 11 U.S.	er 7 er 9 er 11 er 12 er 13 er 13 er primarily coli in 11 U.S.C. § ed by an indivioual, family, or  Chap debtor as defir ness debtor as of ntingent liquid: amount subject this petition.	Petition is Fi	business debts.  for pose."	
□ Debtor estimates that funds will be available ■ Debtor estimates that, after any exempt prop there will be no funds available for distributi  Estimated Number of Creditors ■ □ □ □ □ 1- 50- 100- 200- 49 99 199 999  Estimated Assets	for distribution to unserty is excluded and a on to unsecured credit	dministrative tors.	tors. e expense	50,001- 100,000	OVER 100,000		THE BIONE COOK COLUMN
\$0 to \$50,001 to \$100,000 to \$1 million  Estimated Liabilities	\$1,000,001 \$10,000,001 to \$10 to \$50 million \$10,000,001 \$10,000,001 to \$10 to \$50	to \$100 to million m  \$50,000,001 \$1 to \$100 to to	100,000,001 \$500 illion	\$500,000,001 to \$1 billion	\$1 billion  More than		

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Stouffer, Chad R. Stouffer, Ashley M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Charles O. Zebley, Jr. November 6, 2014 Signature of Attorney for Debtor(s) (Date) Charles O. Zebley, Jr. 28980 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and П Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

#### **B1** (Official Form 1)(04/13)

**Voluntary Petition** 

(This page must be completed and filed in every case)

# Name of Debtor(s):

Stouffer, Chad R. Stouffer, Ashley M.

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# X /s/ Chad R. Stouffer

Signature of Debtor Chad R. Stouffer

## X /s/ Ashley M. Stouffer

Signature of Joint Debtor Ashley M. Stouffer

Telephone Number (If not represented by attorney)

#### **November 6, 2014**

Date

## Signature of Attorney\*

# X /s/ Charles O. Zebley, Jr.

Signature of Attorney for Debtor(s)

#### Charles O. Zebley, Jr. 28980

Printed Name of Attorney for Debtor(s)

#### Zebley Mehalov & White, P.C.

Firm Name

P.O. Box 2123 Uniontown, PA 15401

Address

# COZ@ZebLaw.com OR dwhite@Zeblaw.com 724-439-9200 Fax: 724-439-8435

Telephone Number

# November 6, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

## **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathbf{X}$ 

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

# Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit counseling briefing because of: [Check the application of the country of the count	ble
statement.] [Must be accompanied by a motion for determination by the court.]	
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illne	ess or
mental deficiency so as to be incapable of realizing and making rational decisions with respe	ct to
financial responsibilities.);	
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of	of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by tele	_
through the Internet.);	,
☐ Active military duty in a military combat zone.	
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit courequirement of 11 U.S.C. § 109(h) does not apply in this district.	ınseling
I certify under penalty of perjury that the information provided above is true and corr	act
recruity under penalty of perjury that the information provided above is true and corr	
Signature of Debtor: /s/ Chad R. Stouffer	
Chad R. Stouffer	_
Date: November 6, 2014	

Certificate Number: 00301-PAW-CC-024347990



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on October 13, 2014, at 9:00 o'clock AM EDT, CHAD R. STOUFFER received from InCharge Debt Solutions, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Western District of Pennsylvania, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 13, 2014

By: /s/Iris Serrano

Name: Iris Serrano

Title: Certified Bankruptcy Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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3 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
☐ 4. I am not required to receive a credit cou	inseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for a	letermination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of re-	alizing and making rational decisions with respect to
financial responsibilities.);	
*	109(h)(4) as physically impaired to the extent of being
• ,	in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military c	ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Ashley M. Stouffer
-	Ashley M. Stouffer
Date: November 6, 2	014

Certificate Number: 00301-PAW-CC-024347991



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on October 13, 2014, at 9:00 o'clock AM EDT, ASHLEY M. STOUFFER received from InCharge Debt Solutions, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Western District of Pennsylvania, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 13, 2014

By: /s/Iris Serrano

Name: Iris Serrano

Title: Certified Bankruptcy Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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B 6 Summary (Official Form 6 - Summary) (12/13)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer,		Case No	
	Ashley M. Stouffer			
_		Debtors	Chapter	7
			•	

# SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	105,000.00		
B - Personal Property	Yes	4	36,301.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		95,376.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		55,473.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,879.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,732.00
Total Number of Sheets of ALL Schedu	ıles	18			
	To	otal Assets	141,301.00		
			Total Liabilities	150,849.00	

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B 6 Summary (Official Form 6 - Summary) (12/13)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer,		Case No.		
	Ashley M. Stouffer				
_		Debtors	Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 12)	3,879.00
Average Expenses (from Schedule J, Line 22)	3,732.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,003.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		475.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		55,473.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		55,948.00

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B6A (Official Form 6A) (12/07)

In re	Chad R. Stouffer,	Case No
	Ashley M. Stouffer	

Debtors

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Residence, a 1994 3 bedroom doublewide situate on 3 block high crawlspace on 1.2 acre lot @ 530	Fee simple	н	105,000.00	85,800.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Imel Road, Normalville, Fayette County, PA. Purchased for \$90,000 in 10/07. Spent \$15,000 to add 3 car detached garage in 2011. Current market value assessment of \$65,900.

> Sub-Total > 105,000.00 (Total of this page)

105,000.00 Total >

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B6B (Official Form 6B) (12/07)

In re	Chad R. Stouffer,	Case No.
	Ashley M. Stouffer	

Debtors

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash on hand Location: 530 Imel Road, Normalville PA 15469	J	78.00
2.	Checking, savings or other financial	Checking account @ PNC Bank	н	136.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	Checking account @ PNC Bank	w	2.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking account @ Clairton Works Federal Credit Union w/\$0 balance	Н	0.00
	1	Checking account @ First Niagara Bank	н	1.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	7 rooms of furniture, household goods, appliances including a fully equipped kitchen, furnished living room, furnished dining room, 3 furnished bedrooms and a garage w/refrigerator, dinette table & chairs, microwave, stove, toaster oven, coffee pot, freezer, couch, love seat, 3 TV's, computer, printer, radio, dining table & chairs, 2 beds, dressers, crib and air compressor, all of minimal value, with no one item exceeding the limit. Location: 530 Imel Road, Normalville PA 15469		1,950.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Various children's books. Location: 530 Imel Road, Normalville PA 15469	J	30.00
6.	Wearing apparel.	Clothing, of minimal value Location: 530 Imel Road, Normalville PA 15469	J	400.00
7.	Furs and jewelry.	Various jewelry pieces, diamond engagement ring Location: 530 Imel Road, Normalville PA 15469	J	400.00

Sub-Total > 2,997.00 (Total of this page)

**<sup>3</sup>** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Chad R. Stouffer,	
	Ashley M. Stouffer	

## Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
8.	Firearms and sports, photographic, and other hobby equipment.		Fishing poles, Remington 30-06 pump action shotgun, Smith & Wesson 357 revolver, .22 bolt action shotgun, Taurus 9mm pistol. Location: 530 Imel Road, Normalville PA 15469	н	790.00
9.	Interests in insurance policies.		Cash value of life insurance through State Farm	н	3,084.00
	Name insurance company of each policy and itemize surrender or refund value of each.		Cash value of life insurance through Phoenix/State Farm	J	2,800.00
			Cash value of life insurance through State Farm for son.	W	93.00
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401(k) @ US Steel/Clairton Works. Begun in 2013.	Н	937.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			

Sub-Total > 7,704.00 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Chad R. Stouffer,
	Ashley M. Stouffer

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	20 Lo	06 Ford Escape w/91,162 miles ocation: 530 Imel Road, Normalville PA 15469	J	8,000.00
		lis	000 Ford F-150 pickup truck w/101,267 miles. Title unencumbered. ocation: 530 Imel Road, Normalville PA 15469	e H	6,000.00
		ur	02 Ford Taurus w/122,836 miles. Title is nencumbered. ocation: 530 Imel Road, Normalville PA 15469	Н	2,000.00
		lis in:	85 Ford Mustang. Has not run since 2007. Title unencumbered. Not currently inspected or sured.  ocation: 530 Imel Road, Normalville PA 15469	н	2,400.00

Sub-Total > 18,400.00 (Total of this page)

Sheet  $\underline{2}$  of  $\underline{3}$  continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Chad R. Stouffer,	Case No.	
	Ashley M. Stouffer		

#### Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
			2012 Polaris quad. Location: 530 Imel Road, Normalville PA 15469	Н	5,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.		1 Boxer/Lab mixed dog, 1 Chocolate Lab and 2 cats. Location: 530 Imel Road, Normalville PA 15469	J	200.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.		Timeshare @ Treasure Lake, DuBois, PA. Paid \$6,000 in 1980s. Similar timeshares currently selling for \$2,000.	J	2,000.00

| Sub-Total > 7,200.00 | (Total of this page) | Total > 36,301.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Chad R. Stouffer,	Case No.
	Ashley M. Stouffer	

# Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled (Check one box)  ■ 11 U.S.C. §522(b)(2)  □ 11 U.S.C. §522(b)(3)	\$155,675. (Amount st	ıbject to adjustment on 4/1	mption that exceeds /16, and every three years thereafi or after the date of adjustment.)
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Residence, a 1994 3 bedroom doublewide situate on 3 block high crawlspace on 1.2 acre lot @ 530 Imel Road, Normalville, Fayette County, PA. Purchased for \$90,000 in 10/07. Spent \$15,000 to add 3 car detached garage in 2011. Current market value assessment of \$65,900.	11 U.S.C. § 522(d)(1)	19,200.00	105,000.00
<u>Cash on Hand</u> Cash on hand Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(5) Wife's wild card	78.00	78.00
Checking, Savings, or Other Financial Accounts, Checking account @ PNC Bank	Certificates of Deposit 11 U.S.C. § 522(d)(5) Husband's wild card	136.00	136.00
Checking account @ PNC Bank	11 U.S.C. § 522(d)(5) Wife's wild card	2.00	2.00
Checking account @ First Niagara Bank	11 U.S.C. § 522(d)(5) Husband's wild card	1.00	1.00
Household Goods and Furnishings 7 rooms of furniture, household goods, appliances, including a fully equipped kitchen, furnished living room, furnished dining room, 3 furnished bedrooms and a garage w/refrigerator, dinette table & chairs, microwave, stove, toaster oven, coffee pot, freezer, couch, love seat, 3 TV's, computer, printer, radio, dining table & chairs, 2 beds, dressers, crib and air compressor, all of minimal value, with no one item exceeding the limit. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(3)	1,950.00	1,950.00
Books, Pictures and Other Art Objects; Collectible Various children's books. Location: 530 Imel Road, Normalville PA 15469	es 11 U.S.C. § 522(d)(3)	30.00	30.00
<u>Wearing Apparel</u> Clothing, of minimal value Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(3)	400.00	400.00
Furs and Jewelry Various jewelry pieces, diamond engagement ring Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(4)	400.00	400.00

<sup>1</sup> continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/13) -- Cont.

In re	Chad R. Stouffer,
	Ashley M. Stouffer

## Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed	Current Value of Property Without
		Exemption	Deducting Exemption
Firearms and Sports, Photographic and Other Hob			
Fishing poles, Remington 30-06 pump action shotgun, Smith & Wesson 357 revolver, .22 bolt action shotgun, Taurus 9mm pistol. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(5) Husband's wild card	790.00	790.00
<u>Interests in Insurance Policies</u> Cash value of life insurance through State Farm	11 U.S.C. § 522(d)(8)	3,084.00	3,084.00
Cash value of life insurance through Phoenix/State Farm	11 U.S.C. § 522(d)(8)	2,800.00	2,800.00
Cash value of life insurance through State Farm for son.	11 U.S.C. § 522(d)(8)	93.00	93.00
Interests in IRA, ERISA, Keogh, or Other Pension of 401(k) @ US Steel/Clairton Works. Begun in 2013.	or <u>Profit Sharing Plans</u> 11 U.S.C. § 522(d)(12)	937.00	937.00
Automobiles, Trucks, Trailers, and Other Vehicles 2006 Ford Escape w/91,162 miles Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5) Wife's wild card	3,675.00 224.00	8,000.00
2000 Ford F-150 pickup truck w/101,267 miles. Title lis unencumbered. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5) Husband's wild card	3,675.00 2,325.00	6,000.00
2002 Ford Taurus w/122,836 miles. Title is unencumbered. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(5) Husband's wild card	1,269.00	2,000.00
1985 Ford Mustang. Has not run since 2007. Title lis unencumbered. Not currently inspected or insured. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(5) Husband's wild card	1,269.00	2,400.00
Animals 1 Boxer/Lab mixed dog, 1 Chocolate Lab and 2 cats. Location: 530 Imel Road, Normalville PA 15469	11 U.S.C. § 522(d)(5) Wife's wild card	200.00	200.00
Other Personal Property of Any Kind Not Already I Timeshare @ Treasure Lake, DuBois, PA. Paid \$6,000 in 1980s. Similar timeshares currently selling for \$2,000.	Listed 11 U.S.C. § 522(d)(5) Wife's wild card	2,000.00	2,000.00

Total: 44,538.00 136,301.00

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B6D (Official Form 6D) (12/07)

In re	Chad R. Stouffer,
	Ashley M. Stouffer

**Debtors** 

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLL QULDAH	S P	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 0420 6309 1471 8222  Capital One Retail Services/Polaris P.O. Box 5893  Carol Stream, IL 60197-5893		н	Opened 5/01/12 Last Active 9/12/14 2012 Polaris quad. Location: 530 Imel Road, Normalville PA 15469		- ED			
	┖		Value \$ 5,000.00				5,475.00	475.00
Account No. 0044335765  First National Bank of PA 4140 East State Street Hermitage, PA 16148-3487		J	Opened 8/01/09 Last Active 9/11/14  Purchase money security interest  2006 Ford Escape w/91,162 miles Location: 530 Imel Road, Normalville PA 15469					
			Value \$ 8,000.00				4,101.00	0.00
PNC Bank Attn: Bankruptcy Department P.O. Box 5570 Brecksville, OH 44101-0570		н	Opened 3/01/12 Last Active 9/02/14 Mortgage Residence, a 1994 3 bedroom doublewide situate on 3 block high crawlspace on 1.2 acre lot @ 530 Imel Road, Normalville, PA.					
			Value \$ 105,000.00				85,800.00	0.00
Account No.			Value \$					
continuation sheets attached		•	S (Total of t	Subt			95,376.00	475.00
			(Report on Summary of Sc	_	ota ule	· I	95,376.00	475.00

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B6E (Official Form 6E) (4/13)

In re	Chad R. Stouffer,	Case No.	
	Ashley M. Stouffer		
-		Debtors	

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
□ Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals  Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

In re	Chad R. Stouffer, Ashley M. Stouffer		Case No.	
		Debtors		

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J	L DATE CLAUVEW AS INCURRED AIND	COXF-XGEX	Q U	F	S   P   U   F	AMOUNT OF CLAIM
Account No. 6045 7810 3759 5286			Opened 11/01/13 Last Active 7/20/14	٦Ÿ	Ť		Γ	
Amazon.com/GECRB Attn: Bankruptcy Department P.O. Box 103104 Roswell, GA 30076		w	Internet purchases		E D			2,664.00
Account No. <b>4266 8413 4385 1158</b>	┢		Opened 1/01/14 Last Active 8/07/14	+	╁	t	$\dagger$	
Chase P.O. Box 15298 Wilmington, DE 19850-5298		w	Revolving line of credit used for consumer purchases.					550.00
	L			$\downarrow$	igspace	$\downarrow$	4	559.00
Account No. 4128 0039 6488 7130  Citi Cards P.O. Box 6500 Sioux Falls, SD 57117		н	Opened 5/01/14 Last Active 7/21/14 Revolving line of credit used for consumer purchases.					
				$\perp$		L	$\perp$	5,390.00
Account No. 4296 6300 0000 4068  Clariton Works Federal Credit Union Visa P.O. Box 4519 Carol Stream, IL 60197-4519		н	Opened 4/01/10 Last Active 7/21/14 Revolving line of credit used for consumer purchases.					6,643.00
2 continuation sheets attached			(Total of	Sub this				15,256.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Chad R. Stouffer,	Case No
	Ashley M. Stouffer	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

<u></u>	<u>ا</u>	11	shood Wife leint or Community	Tc	U	Ь	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)		T S , O	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	LLQUL		AMOUNT OF CLAIM
Account No. 454 510 1785 04			Opened 3/01/10 Last Active 7/30/14	٦	D A T E D		
First Niagara Bank 6950 South Transit Road P.O. Box 514 Lockport, NY 14095-0514		Н	Line of credit				24,804.00
Account No. 5049 9060 1861 7712	t		Charge accountinternet purchases				
GECRB/Paypal Buyer Credit Attn: Bankruptcy Department P.O. Box 103104 Roswell, GA 30076		w					6,813.00
Account No. 6045 7610 3674 0265  Q Card/Synchrony Bank Attn: Bankruptcy Department P.O. Box 965060 Orlando, FL 32896-5060		٧	Opened 10/01/13 Last Active 7/20/14 Charge accounttelevision purchases				2,939.00
Account No. <b>4127 8143 0700 0749</b>	$\blacksquare$		Opened 11/01/11 Last Active 7/20/14				2,939.00
UMB Bank Visa P.O. Box 419734 Kansas City, MO 64141-6734		w	Revolving line of credit used for consumer purchases.				2,631.00
Account No. <b>5239 1414 8599 4267</b>	$\vdash$		Opened 12/01/13 Last Active 7/27/14	+			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
GECRB/Walmart Discover Attn: Bankruptcy Dept. P.O. Box 103104 Roswell, GA 30076		W	Revolving line of credit used for consumer purchases.				1,967.00
Sheet no. <u>1</u> of <u>2</u> sheets attached to Schedule of				Subt	tota	.1	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	39,154.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Chad R. Stouffer,	Case No.	
	Ashley M. Stouffer		

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	1.	1		T_	1	-	T
CREDITOR'S NAME,	CODEBTOR	Hu	sband, Wife, Joint, or Community	C O N T I	I N	D I S P	
MAILING ADDRESS	Ď	Н	DATE CLADAWAS INCUIDED AND	Ň	Ļ	S	
INCLUDING ZIP CODE,	E	W	DATE CLAIM WAS INCURRED AND	H	ľ	١'n	
AND ACCOUNT NUMBER	T	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	N	Ų	Ū T E	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subject to setort, so state.	E	חו	חו	
A	┿	$\vdash$	0	NGENT	A T E D		
Account No. 5239 1414 8726 2218	J		Opened 12/01/13 Last Active 7/10/14	'	Ė		
			Revolving line of credit used for consumer	$\perp$	D		1
GECRB/Walmart Discover	ı		purchases.	1			
Attn: Bankruptcy Dept.	ı	Н		1			
P.O. Box 103104	ı			1			
Roswell, GA 30076	ı						
Roswell, GA 30076	ı						
	ı						1,063.00
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Account No.	4	1			1	1	
	1	1			1	1	
	1	1			1	1	
	1	1			1	1	
	1	1			1	1	
	1	1			1	1	
	1	1			1	1	
	1	1			1		
Sheet no. <b>2</b> of <b>2</b> sheets attached to Schedule of	_	•		Sub	toto	1	
							1,063.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	,
				7	Γota	1	
			Ø				55,473.00
			(Report on Summary of S	che	iule	es)	35,773.00

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B6G (Official Form 6G) (12/07)

In re	Chad R. Stouffer,	Case No.
	Ashley M. Stouffer	

Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-24495-JAD Doc 1 Filed 11/10/14 Entered 11/10/14 15:27:02 Desc Main Document Page 25 of 53

B6H (Official Form 6H) (12/07)

In re	Chad R. Stouffer,	Case No.
	Ashley M. Stouffer	

Debtors

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

# Case 14-24495-JAD Doc 1 Filed 11/10/14 Entered 11/10/14 15:27:02 Desc Main Document Page 26 of 53

Fill	in this information to identify your	case:		
De	btor 1 Chad R. Sto	ouffer		
_	btor 2 Ashley M. S	touffer		
Un	ited States Bankruptcy Court for the	e: WESTERN DISTRIC	T OF PENNSYLVANIA	
	se number nown)		-	Check if this is:  ☐ An amended filing ☐ A supplement showing post-petition chapter 13 income as of the following date:
<u>O</u>	fficial Form B 6I			MM / DD/ YYYY
S	chedule I: Your Inc	ome		12/13
atta		On the top of any additi		on about your spouse. If more space is needed, I case number (if known). Answer every question  Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Coke tester	Sales representative
	Include part-time, seasonal, or self-employed work.	Employer's name	United States Steel	Avon Products, Inc.
	Occupation may include student or homemaker, if it applies.	Employer's address	400 State Street Pittsburgh, PA 15219-2800	P.O. Box 105541 Atlanta, GA 30348
		How long employed t	here? 10 years	2 years
Pa	Tt 2: Give Details About Mo	nthly Income		
	imate monthly income as of the ouse unless you are separated.	late you file this form. If	you have nothing to report for any	line, write \$0 in the space. Include your non-filing
	ou or your non-filing spouse have me space, attach a separate sheet to		ombine the information for all empl	oyers for that person on the lines below. If you need
				For Debtor 1 For Debtor 2 or non-filing spouse

Official Form B 6I Schedule I: Your Income page 1

0.00

0.00

0.00

4,567.00

4,567.00

0.00

**List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Chad R. Stouffer Debtor 1 Debtor 2 Ashley M. Stouffer Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4.567.00 0.00 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 1,007.00 0.00 Mandatory contributions for retirement plans 5b. \$ \$ 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. \$ \$ 0.00 0.00 5e. Insurance 5e. \$ 0.00 0.00 **Domestic support obligations** 5f. 5f. \$ 0.00 0.00 5g. **Union dues** 5g. \$ 65.00 0.00 Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 6. \$ 1,072.00 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$ 7. 3,495.00 0.00 List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 110.00 Interest and dividends 8b. 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 Pension or retirement income 8g. 8g. 0.00 0.00 2013 federal income tax refund, 274.00 0.00 Other monthly income. Specify: pro-rated monthly 8h.+ Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 274.00 110.00 10. Calculate monthly income. Add line 7 + line 9. 10. 3.769.00 \$ 110.00 3,879.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 3,879.00 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: Wife is considering whether to continue selling Avon because of reductions/changes to the

company's commission policy.

Fill	in this informa	ation to identify yo	our case:					
	otor 1	Chad R. Stou				Ch	eck if this is:	
DCD	7.01	Chau R. Stot	illei				An amended filing	
Deb	otor 2	Ashley M. Sto	ouffer				A supplement sho	wing post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ted States Bankr	uptcy Court for the:	WESTE	ERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
	se numbe <b>r</b> nown)						A separate filing for 2 maintains a separate	or Debtor 2 because Debto arate household
0	fficial Fo	orm B 6J				•		
		J: Your I	_ Exner	1989				12/1:
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people and another sheet to this				or supplying correct
Par		ibe Your House	hold					
1.	Is this a joir							
	□ No. Go to		n a canar	rate household?				
			ii a Sepai	ate nousenoid?				
	■ N □ Y	-	st file a sep	parate Schedule J.				
2.	Do you have	e dependents?	□ No					
	Do not list D		Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents'	names.			Son		2 weeks	Yes
					San		E	□ No
					Son			■ Yes □ No
					Co-Debtor/Wit	fe	30	□ No ■ Yes
					00 2020171111			■ Yes
					Debtor/Husba	nd	36	■ Yes
3.	Do your exp	enses include		No			<u> </u>	_ 103
		f people other th	nan $_{m \Box}$	Yes				
	yourself and	d your depender	nts? —					
Est	timate your ex		ur bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a supp				
				government assistance i				
	value of suci ficial Form 6I		d have inc	cluded it on <i>Schedule I:</i> `	Your Income		Your exp	enses
4.		or home ownersl and any rent for the		nses for your residence. I or lot.	nclude first mortgag	је 4.	\$	488.00
	If not include	led in line 4:						
	Aa Pool o	estate taxes				4a.	\$	70.00
		estate taxes rty, homeowner's	. or renter	r's insurance		4a. 4b.	:	70.00 80.00
		•		upkeep expenses		4c.	· .	100.00
		owner's associati				4d.	·	0.00
5.	Additional r	nortgage payme	ents for yo	<b>our residence,</b> such as ho	me equity loans	5.	\$	0.00

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Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old	e numl 6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	150.00 55.00 300.00 0.00 600.00 25.00 100.00 50.00 20.00 0.00 125.00 0.00 20.00 0.00 166.00 0.00 296.00 0.00 137.00
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	55.00 300.00 0.00 600.00 25.00 100.00 50.00 20.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 0.00
6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	55.00 300.00 0.00 600.00 25.00 100.00 50.00 20.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 0.00
6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify:  Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	55.00 300.00 0.00 600.00 25.00 100.00 50.00 20.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 125.00 0.00 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify:  Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	300.00 0.00 600.00 25.00 100.00 50.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00 0.00
6d. Other. Specify:  Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$	0.00 600.00 25.00 100.00 50.00 100.00 500.00 20.00 0.00 125.00 0.00 0.00 296.00 0.00
Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	500.00 50.00 100.00 50.00 100.00 500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00 0.00
Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad payments—used for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	25.00 100.00 50.00 100.00 500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00
Clothing, laundry, and dry cleaning Personal care products and services  Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 50.00 100.00 500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00 0.00
Personal care products and services  Medical and dental expenses  Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00 100.00 500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00
Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00 0.00
Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  Quad payments—used for yard maintenance  17d. Other. Specify:  Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	500.00 20.00 0.00 125.00 0.00 166.00 0.00 296.00
Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	20.00 0.00 125.00 0.00 166.00 0.00 296.00 0.00
Entertainment, clubs, recreation, newspapers, magazines, and books  Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$	0.00 125.00 0.00 166.00 0.00 0.00 296.00 0.00
Charitable contributions and religious donations  Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  Quad paymentsused for yard maintenance  17d. Other. Specify:  Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	15a. 15b. 15c. 15d. 16. 17a. 17b.	\$	0.00 125.00 0.00 166.00 0.00 0.00 296.00 0.00
Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  Quad paymentsused for yard maintenance  17d. Other. Specify:  Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	15a. 15b. 15c. 15d. 16. 17a. 17b.	\$	125.00 0.00 166.00 0.00 0.00 296.00 0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  Quad paymentsused for yard maintenance  17d. Other. Specify:  Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 166.00 0.00 0.00 296.00 0.00
15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 166.00 0.00 0.00 296.00 0.00
15c. Vehicle insurance 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	166.00 0.00 0.00 296.00 0.00
15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: Quad paymentsused for yard maintenance  17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	15d. 16. 17a. 17b.	\$ \$ \$	166.00 0.00 0.00 296.00 0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: Quad paymentsused for yard maintenance  17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	16. 17a. 17b.	\$ \$ \$ \$	0.00 0.00 296.00 0.00
Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: Quad paymentsused for yard maintenance  17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	17a. 17b.	\$	0.00 296.00 0.00
Specify:  Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify: Quad paymentsused for yard maintenance  17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	17a. 17b.	\$	296.00 0.00
17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.	17b.	\$	0.00
17b. Car payments for Vehicle 2  17c. Other. Specify: Quad paymentsused for yard maintenance  17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	17b.	\$	0.00
17c. Other. Specify: Quad paymentsused for yard maintenance 17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you.		·	
17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	17c.	\$	137.00
17d. Other. Specify: Fund to replace 1 of 2 high mileage 10+ year old vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.			
vehicles  Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.			
deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).  Other payments you make to support others who do not live with you.	17d.	\$	200.00
Other payments you make to support others who do not live with you.			0.00
	18.	·	0.00
Specify:		\$	0.00
	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Schedule			2.00
	20a.	·	0.00
	20b.		0.00
1 2	20c.	·	0.00
	20d.	· <del></del>	0.00
	20e.	\$	0.00
. Other: Specify: Pet food	21.	· -	45.00
Diapers, wipes, formula for new infant		+\$	125.00
. Your monthly expenses. Add lines 4 through 21.	22.	\$	3,732.00
The result is your monthly expenses.		Ψ	3,732.00
Calculate your monthly net income.			
•	23a.	\$	3,879.00
	23b.		3,732.00
Zary year menting expenses from the LL doorer			3,132.00
23c. Subtract your monthly expenses from your monthly income.			
	23c.	\$	147.00
<ul> <li>23c. Subtract your monthly expenses from your monthly income.         The result is your monthly net income.     </li> <li>Do you expect an increase or decrease in your expenses within the year after you file</li> </ul>			147.00
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage modification to the terms of your mortgage?  No.			se or decrease because of a
☐ Yes.			

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

# United States Bankruptcy Court Western District of Pennsylvania

In re Ashley M. Stouffer		Case No.	
rising in crounci	Debtor(s)	Chapter 7	,
DECLARATION CO	NCERNING DEBTOR'S	S SCHEDULES	
DECLARATION UNDER PEN	NALTY OF PERJURY BY I	NDIVIDUAL DEBT	TOR
I declare under penalty of perjury that I have read the they are true and correct to the best of my knowledge, in		dules, consisting of	<b>20</b> sheets, and that
Date November 6, 2014	Signature: /s/ Ch	ad R. Stouffer	
<u> </u>		De	btor
Date November 6, 2014	Signature: /s/ As	hley M. Stouffer	
	<u></u>		otor, if any)
	[If joint case, both	spouses must sign.]	
I, the [the president or other officer or an author the partnership] of the [corporation or partnership] have read the foregoing summary and schedules, consist they are true and correct to the best of my knowledge, in	orized agent of the corporation named as a debtor in this case ing of sheets [total shown	or a member or an a	authorized agent of lty of perjury that I
Date	Signature:		
	[Print	or type name of individua	al signing on behalf of debtor]
[An individual signing on behalf of a partn	ership or corporation must indicate p	osition or relationship to	debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer		Case No.		
		Debtor(s)	Chapter	7	

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$49,545.00</b>	SOURCE 2014 HusbandUS Steel
\$2,549.00	2014 WifeGross revenue to date from operation of Avon sales business
\$58,979.00	2013 HusbandUS Steel
\$855.00	2013 WifeGross revenue from operation of Avon sales business. Net loss on tax return of \$7,423.
\$54,799.00	2012 HusbandUS Steel
\$3,206.00	2012 WifeGross revenue from operation of Avon sales. Net loss listed on tax return of \$0.

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## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** 

**SOURCE** 

#### 3. Payments to creditors

# None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR PNC Bank Attn: Bankruptcy Department P.O. Box 5570 Brecksville, OH 44101-0570	DATES OF PAYMENTS August, September, October of 2014 @ \$488/month.	AMOUNT PAID <b>\$1,464.00</b>	AMOUNT STILL OWING \$85,800.00
First National Bank of PA 4140 East State Street Hermitage, PA 16148-3487	August, September, October of 2014 @ \$296/month	\$888.00	\$4,101.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately None preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

# 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF

DESCRIPTION AND VALUE OF

**PROPERTY** ORDER

## 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Zebley Mehalov & White, P.C. P.O. Box 2123

8/12/14, 10/17/14

\$50, \$950

Uniontown, PA 15401

InCharge Education Foundation 2101 Park Center Drive Suite 310 Orlando, FL 32835

10/13/14

\$25

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, sayings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

# 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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B7 (Official Form 7) (04/13)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

## 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

**BEGINNING AND** NATURE OF BUSINESS

NAME

**ENDING DATES** 

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

**ADDRESS** 

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	November 6, 2014	Signature	/s/ Chad R. Stouffer	
			Chad R. Stouffer	
			Debtor	
Date	November 6, 2014	Signature	/s/ Ashley M. Stouffer	
			Ashley M. Stouffer	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer			Case No.		
	Asincy III. Glouner	Γ	Debtor(s)	Chapter	7	
PART	CHAPTER 7 IND  A - Debts secured by property of property of the estate. Attach ad-		nust be fully con			is secured by
Proper	ty No. 1	unional pages if nec	Cssary.)			
	or's Name: Il One Retail Services/Polaris		2012 Polaris qu	erty Securing Deb uad. mel Road, Norma		)
-	ty will be (check one): Surrendered	■ Retained				
	ning the property, I intend to (check at Redeem the property Reaffirm the debt  Other. Explain Retain and pay (for		using 11 U.S.C.	§ 522(f)).		
	ty is (check one): Claimed as Exempt		■ Not claimed	as exempt		
Proper	ty No. 2		]			
	or's Name: lational Bank of PA		2006 Ford Esca	erty Securing Deb ape w/91,162 mile mel Road, Normal	S	)
	ty will be (check one): Surrendered	■ Retained				
□	ning the property, I intend to (check at Redeem the property  Reaffirm the debt  Other. Explain	t least one): (for example, avo	oid lien using 11 U	U.S.C. § 522(f)).		

☐ Not claimed as exempt

Property is (check one):

Claimed as Exempt

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B8 (Form 8) (12/08)				Page 2
Property No. 3				
Creditor's Name: PNC Bank		Describe Property S Residence, a 1994 3 high crawlspace on Normalville, PA.	bedroom doublewi	de situate on 3 block mel Road,
Property will be (check one): ☐ Surrendered	■ Retained	1		
If retaining the property, I intend to (check a  ☐ Redeem the property  ☐ Reaffirm the debt ☐ Other. Explain		void lien using 11 U.S.C	. § 522(f)).	
Property is (check one):  ■ Claimed as Exempt		☐ Not claimed as exe	empt	
PART B - Personal property subject to unex Attach additional pages if necessary.)	pired leases. (All three	ee columns of Part B mus	st be completed for e	each unexpired lease.
Property No. 1				
Lessor's Name: -NONE-	Describe Leased P	roperty:	Lease will be Assur U.S.C. § 365(p)(2): ☐ YES ☐	
I declare under penalty of perjury that the personal property subject to an unexpired  Date November 6, 2014  Date November 6, 2014		/s/ Chad R. Stouffer Chad R. Stouffer Debtor  /s/ Ashley M. Stouffer Ashley M. Stouffer		securing a debt and/or

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### United States Bankruptcy Court Western District of Pennsylvania

	Chad R. Stouffer		G N	
In re	Ashley M. Stouffer		Case No.	
		Debtor(s)	Chapter	7

	Debtor(s) Chapter <b>7</b>
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 1,380.00
	Prior to the filing of this statement I have received \$ 665.00
	Balance Due \$ <b>715.00</b>
2.	\$_335.00 of the filing fee has been paid.
3.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify):
4.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify):
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> <li>In Chapter 7 cases: consultations; attending meeting of creditors; negotiations and telephone calls with client and client's creditors; preparation and filing of schedules; uncontested motions not requiring a court appearance; correspondence with client and client's creditors; negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.</li> </ul>
	In Chapter 13 cases: consultations; negotiating with creditors; preparing and filing schedules and plan of repayment; telephone calls and correspondence; attending meeting of creditors and conciliation hearings; preparing and prosecuting adversary actions; defending motions for relief from stay; reviewing and objecting to creditors' claims; responding to Trustee's notice of default; and amending plans and schedules up to the hourly equivalent of the approved "no look" fee. If Debtor opts in to the Court's Loan Modification Program, counsel will charge the additional "no look" fee of \$1,000. All time spent beyond the "no look" fee will be billed at \$250/hour, or the then-prevailing rate, subject to court approval.
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service:  In Chapter 7 cases: representation in any dischargeability action, judicial lien avoidance or relief from stay action; court appearances or any adversary proceeding; fees and costs for amending schedules; responding to a United States Trustee audit; preparing and filing reaffirmation agreements; having the Bankruptcy Court excuse failure to complete Financial Education Course on time; defending discharge actions, contested judicial lien

In Chapter 7 cases: representation in any dischargeability action, judicial lien avoidance or relief from stay action; court appearances or any adversary proceeding; fees and costs for amending schedules; responding to a United States Trustee audit; preparing and filing reaffirmation agreements; having the Bankruptcy Court excuse failure to complete Financial Education Course on time; defending discharge actions, contested judicial lien avoidances or relief from stay actions; redemption actions; defending US Trustee's action to dismiss or convert case to another chapter; re-opening case once it has closed; travel to Bankruptcy Court in Pittsburgh; defending Trustee's objections to exemptions; state court matters; bankruptcy issues arising after case closes; clearing errors on credit report; representation in the Court's Loan Modification Program or any other action to modify a mortgage; or matters unrelated to bankruptcy. ZMW will charge separately for these matters after first discussing them with client.

In Chapter 13 cases: all costs associated with the bankruptcy; fees and costs for converting and completing

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In re	Chad R. Stouffer Ashley M. Stouffer	Case No.
	Debtor(s)	

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

case under another chapter; re-opening case after closed; state court proceedings; fees and costs related to post-petition financing or sale of real estate; and any matters unrelated to bankruptcy. Additional fees and costs are client's responsibility. Additional fees for work beyond the initial fees must be approved the Court and will be either calculated into the plan or billed directly at the rate of \$250/hour.

	be come carearate and are plan				
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in his bankruptcy proceeding.				
Dated:	November 6, 2014	/s/ Charles O. Zebley, Jr.			
		Charles O. Zebley, Jr. 28980			
		Zebley Mehalov & White, P.C.			
		P.O. Box 2123			
	Uniontown, PA 15401				
		724-439-9200 Fax: 724-439-8435			
		COZ@ZebLaw.com OR dwhite@Zeblaw.com			

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

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B 201B (Form 201B) (12/09)

# United States Bankruptcy Court Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer	Case No.			
	Debtor(s)	Chapter	7		
CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE					
	Certification of Debtor  I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy				
Code.					

Chad R. Stouffer Ashley M. Stouffer		/s/ Chad R. Stouffer	November 6, 2014	
Printed Name(s) of Debtor(s)		Signature of Debtor	Date	
Case No. (if known)	X	/s/ Ashley M. Stouffer	November 6, 2014	
		Signature of Joint Debtor (if any)	Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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# **United States Bankruptcy Court** Western District of Pennsylvania

In re	Chad R. Stouffer Ashley M. Stouffer		Case No.	
		Debtor(s)	Chapter 7	
	VER	IFICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtors hereby verify t	hat the attached list of creditors is true and c	correct to the best of their knowledge.	
Date:	November 6, 2014	/s/ Chad R. Stouffer		
		Chad R. Stouffer		
		Signature of Debtor		
Date:	November 6, 2014	/s/ Ashley M. Stouffer		
		Ashley M. Stouffer		
		Signature of Debtor		

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B22A (Official Form 22A) (Chapter 7) (04/13)

In re	Chad R. Stouffer Ashley M. Stouffer	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case Number:		☐ The presumption arises.
	(If known)	■ The presumption does not arise.
		$\square$ The presumption is temporarily inapplicable.

### CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by  $\S 707(b)(2)(C)$ .

	Part I. MILITARY AND NON-CONSUMER DEBTORS				
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
IA	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).				
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.				
Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the A Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 1 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a per at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 5 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date of which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.					
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard				
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;				
	OR				
	<ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>				

#### Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Spouse's Debtor's the filing. If the amount of monthly income varied during the six months, you must divide the **Income Income** six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 4,906.83 \$ 0.00 Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. Debtor Spouse Gross receipts 0.00 \$ 233.33 Ordinary and necessary business expenses \$ 0.00 \\$ 137.17 Business income Subtract Line b from Line a 0.00 96.17 Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse Gross receipts 0.00 | \$ 0.00 Ordinary and necessary operating expenses 0.00 | \$ 0.00 \$ Rent and other real property income Subtract Line b from Line a 0.00 0.00 Interest, dividends, and royalties. 6 0.00 | \$ \$ 0.00 7 Pension and retirement income. \$ 0.00 | \$ 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; 0.00 0.00 if a payment is listed in Column A, do not report that payment in Column B. **Unemployment compensation.** Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ **0.00** | Spouse \$ 0.00 0.00 \$ 0.00 **Income from all other sources.** Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse \$ a. Total and enter on Line 10 0.00 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 4,906.83 96.17 Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).

12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		5,003.00		
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION				
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the number 12 and enter the result.	\$	60,036.00		
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: PA b. Enter debtor's household size: 4	\$	84,396.00		
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.				
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.				
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.				

	Complete Parts IV,	V, VI, and VII o	of this	statement only if req	uired. (See Line 1:	5.)
	Part IV. CALCULA	ATION OF CUR	REN	MONTHLY INCOM	ME FOR § 707(b)(	2)
16	16 Enter the amount from Line 12.				\$	
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.					
	a. b. c.			\$ \$ \$		
	d.			\$		φ
	Total and enter on Line 17					\$
18	Current monthly income for § 70°	7(b)(2). Subtract Lin	e 17 fro	m Line 16 and enter the res	ult.	\$
	Part V. C.	ALCULATION	OF D	EDUCTIONS FROM	INCOME	
	Subpart A: Dec	luctions under Sta	andard	s of the Internal Revenu	ie Service (IRS)	
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$		
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.					
	Persons under 65 year	rs of age		Persons 65 years of age	or older	
	<ul><li>a1. Allowance per person</li><li>b1. Number of persons</li></ul>		a2.	Allowance per person Number of persons		
	c1. Subtotal		c2.	Subtotal		\$
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of					
any additional dependents whom you support.						\$

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your fed any additional dependents whom you support); enter on Line b the tot debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	ty and family size (this information is purt) (the applicable family size consists of deral income tax return, plus the number of all of the Average Monthly Payments for any a Line a and enter the result in Line 20B. <b>Do</b>	
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:	\$	
22A	Local Standards: transportation; vehicle operation/public transportation. You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expens included as a contribution to your household expenses in Line 8.  \[ \begin{array}{c} 0 & \lefta 1 & \lefta 2 \text{ or more.} \]  If you checked 0, enter on Line 22A the "Public Transportation" amout Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>	\$	
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  □ 1 □ 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs \$  Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42  c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.		
24	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Line the result in Line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42  c. Net ownership/lease expense for Vehicle 2	\$	
25	Other Necessary Expenses: taxes. Enter the total average monthly exstate and local taxes, other than real estate and sales taxes, such as income		
	security taxes, and Medicare taxes. <b>Do not include real estate or sale</b>	\$	

26	Other Necessary Expenses: involuntary deductions for e deductions that are required for your employment, such as I Do not include discretionary amounts, such as voluntary	\$	
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.		
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to		
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter		
30	Other Necessary Expenses: childcare. Enter the total ave childcare - such as baby-sitting, day care, nursery and presc	rage monthly amount that you actually expend on chool. Do not include other educational payments.	\$
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on		
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.		
33	Total Expenses Allowed under IRS Standards. Enter the	e total of Lines 19 through 32.	\$
	Health Insurance, Disability Insurance, and Health Savithe categories set out in lines a-c below that are reasonably dependents.		
34	a. Health Insurance	\$	
		\$	
		\$	\$
	Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$		
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		\$
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.		
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.		
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$156.25* per child, for attendance at a private or public elementary or secondary		

 $<sup>^{*}</sup>$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$	
40			Enter the amount that you will conting anization as defined in 26 U.S.C. § 1		e form of cash or	\$
41	Tota	Additional Expense Deduction	as under § 707(b). Enter the total of I	ines 34 through 40		\$
		S	Subpart C: Deductions for De	bt Payment		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.					
		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.			\$	□yes □no	
				Total: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.    Name of Creditor			\$		
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.				\$	
	Chapter 13 administrative expenses. If you are eligible to file a case under chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.					
45	a. b.	issued by the Executive Offic information is available at wy the bankruptcy court.)	apter 13 plan payment. strict as determined under schedules e for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of ve expense of chapter 13 case	x Total: Multiply Lin	es a and b	\$
46	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 42 through 45.			\$		
	Subpart D: Total Deductions from Income					
47	Tota	l of all deductions allowed unde	r § 707(b)(2). Enter the total of Lines	33, 41, and 46.		\$
Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION						
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))			\$		
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))			\$		
50	Mon	thly disposable income under §	707(b)(2). Subtract Line 49 from Line	e 48 and enter the resu	ılt.	\$
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.			\$		

	<b>Initial presumption determination.</b> Check the applicable box and proceed as directed.				
52	☐ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
	☐ The amount set forth on Line 51 is more than \$12,475* Check statement, and complete the verification in Part VIII. You may also				
	☐ The amount on Line 51 is at least \$7,475*, but not more than	\$12,475*. Complete the remainder of Part V	I (Lines 53 through 55).		
53	Enter the amount of your total non-priority unsecured debt		\$		
54	Threshold debt payment amount. Multiply the amount in Line 53	by the number 0.25 and enter the result.	\$		
	Secondary presumption determination. Check the applicable box	and proceed as directed.			
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
	Part VII. ADDITIONAL	EXPENSE CLAIMS			
56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.				
	Expense Description	Monthly An	nount		
	a.	\$			
	b.	\$			
	c.	\$			
	d.	\$			
	Total: Add Lines a, b	, c, and d \$			
	Part VIII. VERI	FICATION			
	I declare under penalty of perjury that the information provided in t	his statement is true and correct. (If this is a	joint case, both debtors		
	must sign.) Date: November 6, 2014	Signature: /s/ Chad R. Stouffer			
	Date. November 0, 2014	Chad R. Stouffer			
57		(Debtor)			
	Date: <b>November 6, 2014</b>	Signature /s/ Ashley M. Stouffer			
	Date. November 0, 2014	Ashley M. Stouffer			
		(Joint Debtor,	if any)		

<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 05/01/2014 to 10/31/2014.

#### Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: US Steel

Income by Month:

6 Months Ago:	05/2014	\$5,221.00
5 Months Ago:	06/2014	\$4,236.00
4 Months Ago:	07/2014	\$6,918.00
3 Months Ago:	08/2014	\$4,269.00
2 Months Ago:	09/2014	\$4,432.00
Last Month:	10/2014	\$4,365.00
	Average per month:	\$4,906.83

# **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period **05/01/2014** to **10/31/2014**.

### Line 4 - Income from operation of a business, profession, or farm

Source of Income: Avon

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	05/2014	\$255.00	\$129.00	\$126.00
5 Months Ago:	06/2014	\$203.00	\$126.00	\$77.00
4 Months Ago:	07/2014	\$363.00	\$207.00	\$156.00
3 Months Ago:	08/2014	\$235.00	\$173.00	\$62.00
2 Months Ago:	09/2014	\$219.00	\$120.00	\$99.00
Last Month:	10/2014	\$125.00	\$68.00	\$57.00
_	Average per month:	\$233.33	\$137.17	
			Average Monthly NET Income:	\$96.17